

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HAIR</i>		<i>05-04-01</i>
O.I.P.E. CLASSIFIER		<i>48</i>	<i>5/25/01</i>
FORMALITY REVIEW	<i>EX</i>	<i>706</i>	<i>6-28-01</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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*H.S.*  
*6-28-01*

*JUL 706*

*35379 U.S. PTO*  
*03/85/77*